DEPARTMENT OF HEALTH AND HUMAN SERVICES HEAL* CARE FINANCING ADMINISTRATION		LOUS FORM APPROVED OMB NO. 0938-0193
TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE
STATE PLAN MATERIAL	04-08	Alaska
FOR: HEALTH CARE FINANCING ADMINISTRATION	3. PROGRAM IDENTIFICATION: T SOCIAL SECURITY ACT (MEDI	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE  June 1,2003 2004 (R41)	
DEPARTMENT OF HEALTH AND HUMAN SIRVINGES  5. TYPE OF PLAN MATERIAL (Check Gie):  6 2004		
NEW STATE PLAN AMENDMENT TO BE	CONSIDERED AS NEW PLAN	
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME		ch amendment)
6. FEDERAL STATUTE/REGULATION CITATION: 42 CFR 440.167	1	\$ 0 \$ 0
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attached pages to Attachment 3.1A, Page 11	9. PAGE NUMBER OF THE SUPER OR ATTACHMENT (If Applicable Attached pages to Attachment 3.1A, I	e):
10. SUBJECT OF AMENDMENT:		
Personal Care Services update to reflect new state regulations that allow	consumer service plans to be approved b	by either the Personal Care
Agency or the Department of Health and Social Services.  11. GOVERNOR'S REVIEW (Check One):		
GOVERNOR'S REVIEW (Check One).  GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	○ OTHER, AS SPECIFIED:     Governor does not wish to comment	
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:	
J. Sully	Alaska Department of Health and Social Services Office of the Commissioner	
13. TYPED NAME: Jerry Fuller	P.O. Box 110601	
	1.O. DOX 110001	
14. TITLE: Medicaid Director	Juneau, Alaska 99811-0601	
Department of Health and Social Services	1	
	1	
Department of Health and Social Services  15. DATE SUBMITTED: June 29, 2004  FOR REGIONAL OF	Juneau, Alaska 99811-0601	
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## **Description of Service Limitations**

## f. Personal Care Services:

Covered services are limited to non-technical, hands-on assistance with activities of daily living (ADLs), which include bathing, dressing and grooming; problems with instrumental activities of daily living (IADLs), such as shopping and cleaning necessary to maintain the health and safety of the recipient, and other problems that require trained care. Personal care services must be provided either in the recipient's home, or other locations necessary to assist with the activities of daily living, but may not be provided in institutions. Allowable services must be defined in a service plan developed as a result of a functional assessment conducted in the consumer's home and approved by the state-authorized Personal Care Agency or the Alaska Department of Health and Social Services.

Services must be provided only through a qualified PCA agency by health care paraprofessionals called Personal Care Assistants (PCAs). The PCAs must have completed a state-approved PCA training program, except in cases where:

- the personal care agency has determined that the recipient or their representative is capable of specifying the training requirements for the personal care assistant and supervising them;
- the personal care agency has trained the recipient or their representative in their responsibilities; and
- the personal care assistant has successfully completed the recipient-specific training provided by the recipient or their representative.

To be a representative, an individual must be directly involved in the recipient's day-to-day care and available to assume the responsibility of managing the recipient's care, including directing the care as it occurs in the home. Legally responsible relatives of the recipient are excluded from payment for personal care services.

## Personal care services do not include:

- (1) application of dressings involving prescription medication and aseptic techniques; invasive body procedures, including injections and insertion or removal of catheters; tracheostomy care; tube or other enteral feedings; medication administration; or care and maintenance of intravenous equipment. However, personal care assistants may perform these tasks under the following conditions:
  - the recipient of services, or their representative, is capable and willing to delegate such functions, which are within the purview of individuals and their unpaid caregivers to perform;
  - the recipient or representative is capable and willing to supervise the administration of these tasks; and
  - the personal care agency has determined that the recipient or their representative is capable of delegating the tasks and perform these supervisory functions.
- (2) heavy chore services in the home, including cleaning floors and furniture not used directly by the recipient, laundry not incidental to the recipient's care, cutting firewood, and shopping for groceries and other household items not required specifically for the health and maintenance of the consumer;
- (3) any task the personal care agency, supervising nurse, or division determines, as a result of the assessment, could reasonably be performed by the consumer or a member of the consumer's household;
- (4) respite care intended primarily to relieve a member of the consumer's household, a family member, or a caregiver other than a personal care assistant from the responsibility of caring for the consumer; and
- (5) supervision, babysitting or care of any other household members, social visitation, general monitoring for equipment failure, home maintenance, or pet care, except for a certified service animal.

TN No: 04-08

Effective Date: June 1, 2004

Supersedes TN No. 03-12